

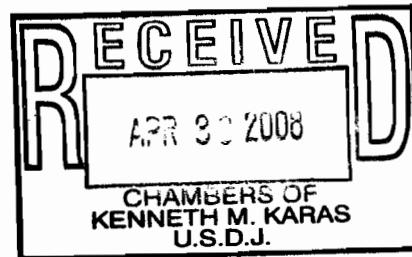
MEMO ENDORSED

CHARLES J. DIVEN, JR., ESQ.

ATTORNEY AT LAW

April 30, 2008

United States District Court Judge
300 Quarropas Street
White Plains, New York 10601
Attn: Hon. Kenneth M. Karas



By Fax only 914-390-4152

Re: **US v Henry P. Steeneck**
07CR 929

Your Honor:

I write to provide an update to Mr. Steeneck's current medical condition and to extend his release based on his medical condition. Annexed hereto please find a letter from Dr. Saran Rosner summarizing the procedures had and the current course of medical treatment.

As set forth in Dr. Rosner's letter Mr. Steeneck is currently receiving intravenous antibiotics to fight an infection. At the completion of the 10 day course, Dr. Rosner will be having a lumbar puncture performed to determine whether the infection has cleared. In the event that the infection is cleared Mr. Steeneck will undergo surgery to install the shunt and tube. In the event that the infection is not cleared Dr. Rosner will be consulting with a specialist for infectious diseases.

Currently Mr. Steeneck is in the home of his sister consistent with the terms of Your Honor's Order of release receiving the antibiotics intravenously. His father is available for the transport to both the hospital and the doctor's office. As described in the attached letter the infection represents a serious complication for the defendant. I remind the Court that since infection has made it necessary to remove the shunt and drain tube and Mr. Steeneck is again affected by the original problem of cranial pressure.

Under these circumstances and with these complications, I respectfully request that the medical release be extended until May 16, 2008, subject to modification based upon information to be provided by the undersigned to the Court on the current weekly basis, regarding the medical condition of Mr. Steeneck. As to tomorrow's appearance I would respectfully request that Mr. Steeneck's appearance be waived for the medical reasons stated above. If the Court deems necessary, I will attempt to make Dr. Rosner available for a call from the Court at 3PM when this matter is scheduled.

I will contact AUSA Sarah Rebecca Krissoff, and report to the Court whether I have the consent of the people for the extension of the medical leave.

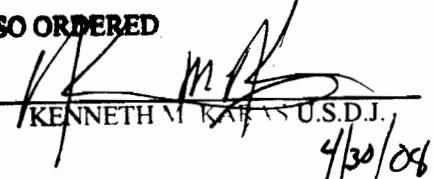
I also report to the Court that although Dr. Rosner's letter is dated April 26, 2008 it was hand delivered by Mr. Steeneck's father to my office yesterday afternoon. Mr. Steeneck's father waited at the doctor's office for the letter to be available.

Sincerely,


Charles J. Diven, Jr., Esq.

*THE CLERK OF COURT IS
RESPECTFULLY REQUESTED
TO DOCKET THIS LETTER
AND THE LETTER FROM
DR. ROSNER ATTACHED, THERETO.*

SO ORDERED


KENNETH M. KARP U.S.D.J.
4/30/08

cc: *AUSA Sarah Rebecca Krissoff, by fax only 914-682-3392*
Scott Kowal, US Pretrial Services by fax only 914-390-4035

SARAN S. ROSNER, M.D.
NEUROLOGICAL SURGERY
245 Saw Mill River Rd.
Hawthorne, N.Y. 10532

(914) 741-2666

April 26, 2008

Hon. Judge Kenneth M. Karas
United States Courthouse
300 Quarropas Street, Room 533
White Plains, NY 10601

RE: Henry Steeneck

Dear Judge Karas:

Please be advised that Mr. Henry Steeneck's postoperative course following his valve replacement of a cystoperitoneal shunt has been a complicated one. He presented on April 20, 2008, to the emergency department at Hudson Valley Hospital 13 days following the procedure with right lower quadrant abdominal pain, low-grade fever, and laboratory evidence of infection. He was admitted to the hospital, and his shunt catheter was first externalized. An infection with Gram-positive cocci was identified, and the entire shunt system was, therefore, removed. In addition, Mr. Steeneck had to go through yet another procedure, in which abdominal shunt tubing, from a procedure performed years earlier and which was free-floating in his intraperitoneal space, had to be removed laparoscopically by general surgery. He is now on intravenous antibiotics twice daily to address his infection.

The plan of treatment for Henry at this point is to complete a 10-day course of intravenous antibiotics, following which a lumbar puncture will be performed to determine if the infection has been cleared from his spinal fluid. If the infection has been cleared, the cystoperitoneal shunt will then be replaced. If the infection persists though, antibiotics will continue as per our infectious disease consult.

I am sure that you will appreciate that such infection in this clinical setting represents a serious complication. I respectfully urge you to allow Henry to be easily available to me for monitoring, care, and followup until the new shunt system is in place and its proper functioning documented.

April 26, 2008
RE: Henry Steeneck
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I kindly appreciate your attention to this serious matter.

Sincerely,



Saran S. Rosner, M.D.
SSR/gisl/jac/grmz/0428/SSR20240